

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH ADULT SYSTEMS OF CARE CALWORKS MENTAL HEALTH SUPPORTIVE SERVICES

DMH CALWORKS BULLETIN No. 05-06 PROVIDER COMPLIANCE WITH DPSS CALWORKS PROGRAM REQUIREMENTS

September 15, 2005

TO: All DMH CalWORKs Mental Health Supportive Services Providers

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CalWORKs Program

SUBJECT: Provider Compliance with DPSS CalWORKs Program Requirements

- 1. Purpose
- 2. Background
- 3. DPSS Program Requirements
- 4. Explanation of Requirements

1. PURPOSE

The purpose of this Bulletin No. 05-06 is to provide an overview of the DPSS program standards required of CalWORKs mental health providers as outlined the Memorandum of Understanding between DPSS and DMH.

2. BACKGROUND

In 2000 DMH signed a Memorandum of Understanding (MOU) with DPSS to provide mental health services to CalWORKs participants. The MOU required DPSS and DMH to monitor actual utilization of CalWORKs mental health services and related

expenditures. Additionally, the MOU contained a provision that DMH provide case specific information on each participant for whom payment was requested, i.e., name, social security number, case number, effective date of service, type of service provided, and effective termination date. See DMH CalWORKs Bulletin No. 05-03 CalWORKs Billing Reconciliation for more information about the reconciliation process.

In 2003 the MOU was amended to add additional monitoring requirements, including a review of the fiscal, service delivery and administrative aspects of contract agencies. The MOU required that DMH include the monitoring results in its Monthly Management Report (MMR).

In 2004 the MOU was further amended to include provider program requirements. DMH must ensure that the standards listed in the Performance Requirements Summary (PRS) are included in its contracts with CalWORKs mental health providers. DMH must also conduct monitoring to ensure performance of these standards.

3. <u>DPSS PROGRAM REQUIREMENTS</u>

The chart of DPSS Performance Requirements on the next page identifies the major services and standards of performance DPSS expects from DMH CalWORKs mental health supportive services providers. Compliance with these requirements is monitored at the same site visits conducted by DMH. Each requirement is scored on a scale of 0 (zero compliance) to 5 (full compliance).

It is important to note that the DPSS Performance Requirements are not an inclusive listing of all service requirements monitored DMH. While the DPSS Performance Requirements often address the delivery of services, DMH has program requirements that address quality of mental health services.

DPSS mandates that each agency's score must be at a minimum at least <u>75.0%</u>, to reflect compliance with performance requirements. In the event that an agency's score is lower than 75.0%, DPSS requires that corrective action be taken. The agency will be required to develop a Corrective Action Plan, and DMH will schedule a follow-up site visit within 3-6 months to confirm that the corrective actions have been implemented.

DPSS PERFORMANCE REQUIREMENTS	
1	Agency provides assessment/treatment services within 10 days of CASC/DPSS referral or within 2 days in cases of emergent needs.
2	Agency has bilingual staff available to provide services to CalWORKs participants.
3	Licensed and/or waivered clinical staff provides mental health services.
4	Staff receive training and updates of CalWORKs, i.e., attends CW 101, CW Quarterly Providers and Service Area meetings.
5	The agency has a Quality Assurance protocol/procedure in place.
6	The agency has procedures in place to receive, investigate and respond to a CalWORKs participant's complaint.
7	Agency complies with confidentiality provisions.
8	Staff tracks and reports to GAIN CalWORKs participants' progress towards employment.
9	Staff sends required GAIN documents to the GSW in a timely basis.
10	Staff terminates clients from the CalWORKs mental health supportive services program when the client has failed to attend treatment for 30 days and has failed to contact the provider.
11	The agency conducts community outreach activities targeted to potential CalWORKs supportive services clients.
12	The agency bills for CalWORKs services on a timely basis.

4. **EXPLANATION OF REQUIREMENTS**

Below is a brief explanation of the DPSS program requirements. These are not intended to be all inclusive or exhaustive explanations of the requirements, but rather the same as the guidelines.

1. <u>Agency provides assessment/treatment services within 10 days of CASC/DPSS</u> referral or within 2 days in cases of emergent needs.

CalWORKs providers must have sufficient mental health treatment staff available to see CalWORKs participants within ten (10) days of a referral from GAIN or CASC. The timeframe for attending the clinical assessment was relaxed in 2007 from five days to ten. In the case of emergent needs, providers must be able to

see the participant within two days. This mandate is listed in the Performance Requirements identified by DPSS for CalWORKs mental health supportive services. When a provider cannot schedule an Intake/ Assessment appointment for a CalWORKs participant within 5 days, the provider must immediately complete the "Notice of Temporary Unavailability" form) and fax it to DMH.

2. <u>Agency has bilingual staff available to provide services to CalWORKs</u> participants.

Agencies should have bilingual staff and/or backup procedures to provide translators for non-English speaking CalWORKs participants. In the event these services are not available in-house, the agency should be able to provide an appropriate referral and assist in linking the participant with an appropriate resource.

3. Licensed and/or waivered clinical staff provides mental health services.

DMH checks clinical staff licenses to confirm that the clinicians are in good standing with the appropriate professional licensing agency and that the license has not expired. If the license has expired or the therapist is not licensed or waivered, DMH requires the agency THERAPIST cease providing clinical services immediately. In the event the therapist continues to provide the unauthorized services, the situation will be reported to the appropriate licensing authorities.

4. <u>Staff receive training and updates of CalWORKs information, i.e., attends CalWORKs trainings, CalWORKs Quarterly Providers meetings, and Service Area meetings.</u>

Agencies that are out of compliance with DPSS requirements are often the agencies that fail to send staff to attend CalWORKs meetings or trainings. DMH and DPSS provide current information on the CalWORKs programs requirements at the service area meetings and quarterly provider meetings. DMH submits the sign-in lists from each of these meetings to DPSS on a monthly basis. DMH staff also provides specialized training through its CalWORKs documentation and CalWORKs 101 trainings.

5. The agency has a Quality Assurance protocol/procedure in place.

Agencies must have an established, written policy describing the procedures to ensure quality of services and compliance with all local, state, and federal laws.

6. The agency has procedures in place to receive, investigate and respond to a CalWORKs participant's complaint.

Agencies must have an established, written policy regarding responses to client complaints.

7. Agency complies with confidentiality provisions.

DMH must ensure that adequate provisions to keep DPSS participant records confidential are implemented and maintained. Providers must follow the State and DMH policies and procedures mandated for confidentiality. CalWORKs participant files must be kept in locked file cabinets in secured rooms accessible only to authorized personnel.

Agencies must obtain the participant's signed consent to release information authorizing disclosure of information to DPSS/GAIN and any other organization before any information is released. Such consents to release information must be updated on a yearly basis or sooner, according to the terms of the signed consent. Providers can disclose only the minimum information to DPSS/GAIN (i.e., number of hours of treatment, expected duration, ability to participate in other Welfare-to-Work activities) on the GN 6006B, GN 6008, or any other GAIN forms. Providers cannot disclose any other information, e.g. diagnosis, participant's health or mental status, etc.

8. <u>Staff tracks and reports to GAIN CalWORKs participants' progress towards employment.</u>

Agency staff must assess the participant's progress to determine if he/she can participate in a concurrent Welfare-to-Work activity and/or employment within six (6) months from start of treatment. Results must be documented on the GN 6008 under Section IV, Progress "Other."

9. Staff sends required GAIN documents to the GSW in a timely basis.

The agency must communicate the status of the participant's progress and treatment/service to GAIN staff using the appropriate form as follows:

Agencies must follow-up on CalWORKs, post-employment services (PES) and PTL participants who fail to comply with their scheduled mental health treatment appointments or drop out of mental health treatment. Additionally, PES and PTL participants must be placed in these components by GAIN.

10. <u>Staff terminates clients from the CalWORKs mental health supportive services program when the client has failed to attend treatment for 30 days and has failed to contact the provider.</u>

When a client has failed to attend treatment for over 30 days and the clinician has not been notified of a valid reason for the absence and attempts to contact

the client have been made the Therapist must terminate the client from the Mental Health program and notify GAIN.

11. The agency conducts community outreach activities targeted to potential CalWORKs supportive services clients.

The agency participates in on-site orientation at CalWORKs/GAIN offices, Job Services sites, or Refugee Immigrant and Training Employment (RITE) agencies to disseminate information on available mental health services. This includes outreach information and education to potential CalWORKs, PES and PTL participants at DPSS or other locations as designated by DPSS to provide awareness of available mental health service and to correct misconceptions about the CalWORKs WtW and supportive services programs. In reviewing an agency's COS activity, DMH takes into consideration the agency's CalWORKs COS allocation. For many agencies, outreach services to increase referrals are not applicable as there may already be a waiting list to begin services.

12. The agency bills for CalWORKs services on a timely basis.

The agency must submit its CalWORKs claims to DMH on a monthly basis, because the DMH submits these claims to DPSS on a monthly basis. The DMH site visit includes a review of the agency's billing, and when claims are few or not entered at all for a month, then the billing procedures are questioned. In addition, when no billing or low billing is indicated, the question is raised as to why the agency is providing few or no services to CalWORKs participants.